

STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

APPLICATION FOR A PERMIT TO TRANSFER GROUND WATER TO ADJOINING STATE

INSTRUCTIONS



For Department Use Only

This form must be completed in full. An incomplete or defective form will be returned. Failure to resubmit a corrected application within the time limit specified will cause dismissal of the application. Complete items 1-8 by printing in ink or typing the appropriate information. The following information is also required (see Department Rules, Title 456, Chapter 6 for additional information):

1. A map submitted on 8½" x 11" paper or paper folded to such a size showing the location of the well(s); the pipeline(s) or other means of transporting water; the location of use.
2. Information on the possible negative effects of the proposed withdrawal on ground water and surface water supplies in the area.
3. Other information the applicant deems relevant to the Department's consideration of the provisions of Neb. Rev. Stat. §46-613.01. Additional information may be attached to the application.

A non-refundable filing fee of \$10 (payable to the Department of Natural Resources) must accompany this application. Forward this application, fee and map to:

Department of Natural Resources
245 Fallbrook Blvd., Suite 201
Lincoln, Nebraska 68521-6729
The telephone number is (402) 471-2363

Filed at _____ a.m./p.m. on _____, 20____

Application No. TA-_____

Natural Resources District _____

Receipt No. _____ Amount _____

1. Name of applicant: _____ Telephone Number (____) _____
Address _____
City _____ State _____ Zip Code _____ + _____

2. If applicable: Well Registration Number(s) _____
Management or Control Area Permit/Number(s) _____

3. Identify the location and capacity of well(s):
____ ¼ of the ____ ¼ of Section _____, Township ____ North, Range ____ E W , _____ County, _____ gpm
____ ¼ of the ____ ¼ of Section _____, Township ____ North, Range ____ E W , _____ County, _____ gpm
____ ¼ of the ____ ¼ of Section _____, Township ____ North, Range ____ E W , _____ County, _____ gpm
____ ¼ of the ____ ¼ of Section _____, Township ____ North, Range ____ E W , _____ County, _____ gpm
____ ¼ of the ____ ¼ of Section _____, Township ____ North, Range ____ E W , _____ County, _____ gpm

4. Identify the location of use:

5. Maximum annual quantity of ground water requested for use in adjoining state: _____ per annum _____ acre-feet

6. Maximum daily withdrawal requested: _____ per day _____ gallons

7. Ground water is proposed to be used for: Irrigation Public Water Supply Commercial/Industrial

Domestic Livestock

Other (explain) _____

8. Projected date water will first be pumped or date water was first pumped _____

9. State all alternative sources of water that are available and why applicant chooses not to use them:

I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete and accurate.

Signature of Applicant

Date